

IT IS CLAIMED:

1. A method of increasing the IL-10/IL-12 blood ratio in subjects suffering from an autoimmune disorder, comprising
orally administering interferon-tau to the subject at a daily dosage of greater than about 5×10^8 Units to produce an initial measurable increase in the subject's blood IL-10 level, relative to the blood IL-10 level in the subject in the absence of interferon-tau administration, and a decrease in the subject's IL-12 blood level, relative to the IL-12 level in the absence of interferon-tau administration, and
continuing to orally administer interferon-tau to the subject on a regular basis of at least several times per week, independent of changes in the subject's blood IL-10 level, until a desired clinical endpoint is achieved.
2. The method of claim 1, wherein said administering comprises administering an interferon-tau selected from ovine interferon-tau and bovine interferon-tau.
3. The method of claim 2, wherein said administering comprises administering ovine interferon-tau having a sequence identified as SEQ ID NO:2 or SEQ ID NO:3.
4. The method of claim 1, wherein said oral administration is to the intestinal tract of the subject.
5. The method of claim 1, wherein said autoimmune condition is multiple sclerosis.
6. The method of claim 1, wherein said continuing to administer continues during the period of the subject's symptoms and the desired clinical endpoint is a reduction in symptoms associated with the condition.
7. The method of claim 1, wherein said autoimmune conditions is selected from the group consisting of Type I diabetes mellitus, rheumatoid arthritis, lupus erythematosus, psoriasis, Myasthenia Gravis, Graves' disease, Hashimoto's thyroiditis, Sjogren's syndrome, ankylosing spondylitis and inflammatory bowel disease.

8. A method of inhibiting progression of an autoimmune condition in a subject, comprising

orally administering interferon-tau to the subject at a daily dosage of greater than about 5×10^8 Units to produce an initial measurable increase in the subject's blood IL-10 level, relative to the blood IL-10 level in the subject in the absence of interferon-tau administration, and a decrease in the subject's IL-12 blood level, relative to the IL-12 level in the absence of interferon-tau administration, and

continuing to orally administer interferon-tau to the subject on a regular basis of at least several times per week, independent of changes in the subject's blood IL-10 level, until a desired clinical endpoint is achieved.

9. The method of claim 8, wherein said administering comprises administering an interferon-tau selected from ovine interferon-tau and bovine interferon-tau.

10. The method of claim 9, wherein said administering comprises administering ovine interferon-tau having a sequence identified as SEQ ID NO:2 or SEQ ID NO:3.

11. The method of claim 8, wherein said oral administration is to the intestinal tract of the subject.

12. The method of claim 8, wherein said autoimmune condition is multiple sclerosis.

13. The method of claim 8, wherein said continuing to administer continues during the period of the subject's symptoms and the desired clinical endpoint is a reduction in symptoms associated with the condition.

14. The method of claim 8, wherein said autoimmune conditions is selected from the group consisting of Type I diabetes mellitus, rheumatoid arthritis, lupus erythematosus, psoriasis, Myasthenia Gravis, Graves' disease, Hashimoto's thyroiditis, Sjogren's syndrome, ankylosing spondylitis and inflammatory bowel disease.